

Show Me Healthy Women

*News & Views***Provider Survey Results**

In October, an evaluation survey was mailed to all Show Me Healthy Women (SMHW) and WISEWOMAN providers. Below is an overview of the returned surveys. Please note the “very to somewhat satisfied” answers are collapsed into one category, while the “dissatisfied and very dissatisfied” results are reported individually.

	Very to somewhat satisfied	Dissatisfied	Very Dissatisfied	Not Applicable	Did not answer question
Central office customer service	100%				
Regional program coordinator customer service	100%				
Information in Provider Manual	100%				
Use of forms	92%	4%			4%
Ease of use of MOHSAIC	96%		4%		
Annual on-site technical assistance	74%	8%	4%	12%	2%
Overall satisfaction with SMHW	100%				
Overall satisfaction with WISEWOMAN	97%	3%			
WISEWOMAN lifestyle education sessions	100%				

Ninety-four percent of SMHW providers are satisfied with the timeliness of payment, 2 percent are not satisfied, and 4 percent did not answer the question. Of the SMHW providers responding, 40 percent want more training, while 54 percent are satisfied with current training.

On initial analysis, survey questions on the WISEWOMAN lifestyle education tools did not give conclusive results. The Goal Setting Worksheet and Goal Tracking Log received the lowest usage and effectiveness rankings. WISEWOMAN staff are contacting providers to follow-up on these questions to assure the program is supplying effective education materials.

A review of the completed surveys showed the two areas with the lowest overall satisfaction for SMHW are annual on-site technical assistance and ease of forms. Show Me Healthy Women staff and the regional program coordinators will work closely to develop a plan for addressing these two areas needing improvement. Providers are encouraged to share ideas by contacting the regional program coordinator for your facility, or the central office.

Show Me Healthy Women and WISEWOMAN would like to thank the providers for taking time to answer the survey. If you have been unable to complete the survey and would like to, please complete and fax to your regional program coordinator or to the central office at 573-522-2899. Your participation is very important to the program and its continued success.



**Thank you
Show Me Healthy
Women providers
for all you do to
make this
program a
success!**



Free breast and cervical cancer
screenings through Show Me
Healthy Women saves lives.

What Clients Say

“I think this program is wonderful. Without [it] I would not be able to afford the tests. Thank you very much and may God bless you all.” **-Mary**

“The service I received was excellent. The nurse practitioner was very kind and helpful. I really like the program.” **-Anonymous**

“I am very pleased about the Healthy Women’s Program. I would not have been able to get the test done that I have gotten (sic) done because of no insurance. Thank you so much. I had to have a second mammogram, and now they want to do an ultrasound.” **-Deborah**

From the SMHW client survey:

“The staff was very caring and treated me with much respect, even though I had no insurance.”

“I had no insurance and I couldn’t afford a Pap smear and breast exam. They found a lump and I was treated for it.”

“I am very appreciative of all the services you provide and how well I’ve always been treated.”

“I appreciate this program, and am single with no insurance. My Mom, Grandma, and Aunt all had cancer. I would not be able to get mammograms without this program.”

“I never knew that I might qualify for a program that pays for my annual examination. It has helped me tremendously.”

“Service was exceptional and efficient. I had a great experience. Thank you.”

Winning the War on Breast Cancer

How We're Winning the War on Breast Cancer

Susan Brink
Health; October 2009

Over 190,000 women will be diagnosed with breast cancer this year. Many of them will go on to live cancer-free lives because of enormous improvements in how we detect, treat, even prevent this disease. Here's how we're actually winning the war on breast cancer.

We know more than

ever: Once identified only by how far the disease had advanced – such as stage 0 or stage IV – scientists now know that breast cancer is actually many diseases and that each tumor has a unique genetic fingerprint. There is luminal A and B, HER2 type, and triple negative, among others. That means physicians can more effectively target treatment with therapies that have the best chance of working.

Treatment gets per-

sonal: Researchers now know that women diagnosed in the early stages of estrogen-receptor-positive cancer respond

well to hormonal therapies like tamoxifen and aromatase inhibitors, which starve breast cancer cells of the hormones they need to grow. Since 2004, the Oncotype DX test that helps identify the best treatment has been available to women who get this type of cancer, which is about 75 percent of the breast cancer patients. Women on hormone therapy might be spared chemotherapy's nausea, exhaustion, and hair loss.

Surgery is less trau-

matic: We can only wish for the day when mastectomy becomes unnecessary. But the procedure isn't nearly as devastating as it used to be. Total skin-sparing mastectomy, in which the surgeon removes the breast tissue while saving the skin envelope, can work for many women who don't have a tumor under the nipple or close to the skin. However, it is estimated that less than 10 percent of women are offered this option. Depending on the tumor, a common option is lumpectomy combined with radiation therapy. The choice of more than 60 percent of women, if

they are given the option, lumpectomy plus radiation has proved as effective as mastectomy for overall survival.

Radiation is much safer:

If a woman needs radiation, new techniques target tumors with much more precision. In some cases, the standard six weeks of treatment can now be reduced to as little as one week, cutting down on the fatigue many patients feel. Better planning and targeting also decrease the chances that radiation will lead to heart damage, and radiating only part of the breast leaves open the possibility that the treatment can be used again if the disease returns.

Reconstruction looks

great: A new specialty is emerging that combines breast cancer surgery with plastic and reconstructive surgery known as oncoplastic surgery. There are few oncoplastic surgeons, but many more are being trained to increase the availability for good cosmetic outcomes. Women should discuss cosmetic results with their surgeon before surgery.



Based on fair evidence, screening mammography in women aged 40 to 70 years decreases breast cancer mortality.

The benefit is higher for older women, in part because their breast cancer risk is higher.

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National Breast Cancer Awareness Month

Pettis County Supports Breast Cancer Awareness Month

The Pettis County Family Support and Children's Division supported Breast Cancer Awareness Month by wearing "Fight Like a Girl" tee shirts. The shirts are worn several times during the month of October.

Photo submitted by Victoria Hoover, Show Me Healthy Women Outreach Coordinator, Pettis County.



Fight Like a Girl Friday at Department of Health and Senior Services

The Department of Health and Senior Services kicked off Breast Cancer Awareness Month on October 2. Margaret Donnelly, DHSS director, encouraged employees to wear something pink on that day.

Bulldogs Still Tough Enough to Wear Pink

Odessa High School Bulldogs wore pink socks and pink ribbons on their helmets for the month of October. The community started calling them the "lucky pink socks" since the Bulldogs won every game in October.

Photo submitted by Marie Morgan, Show Me Healthy Women Outreach Coordinator, Lafayette County.





Free Mammograms and Pap Tests

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Winning the War on Breast Cancer

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You can reduce risk: There is a clear link between even moderate drinking and a slightly increased risk of breast cancer, so cutting alcohol consumption is worthwhile. Controlling your weight appears to be helpful, too. Significant weight gain in adulthood, between the ages of 20 and 50, may double the risk of breast cancer. Studies show that moderate to vigorous exercise can lower your risk for developing breast cancer by 30 percent.

Research is ramping up: A new study, the Love/Avon Army of Women project (ArmyOfWomen.org), has en-

rolled more than 300,000 women and hope to recruit a million of all ages and every ethnicity, some who have breast cancer and some who don't. With those kinds of numbers, researchers can begin to identify common risk factors that might cause breast cancer. Participants will be asked questions about oral contraceptives, fertility drugs, hair dye, deodorant, and much more. Just as the Framingham Study identified common heart disease risks like high cholesterol, smoking, and obesity, this study could ultimately point out what really causes breast cancer and how to prevent it.



Current research may lead to the real causes of breast cancer.